

2002 CAMPAIGN CONTRIBUTIONS AND EXPENSES

State of Nevada

ROSE GORDON **RENO CITY COUNCIL** **WARD 4**
 Name (print) Office (if applicable) District (if applicable)
PO BOX 454, SPARKS NEVADA 89432 **(775) 324-6263**
 Mailing Address (include city and zip code) Telephone No.
 E-Mail Address

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ AMENDED

- ☐ **Report #1 — Due August 27, 2002**
 Office with a 2-year term Period: Jan. 5, 2001 — Aug. 22, 2002
 Office with a 4-year term Period: Dec. 20, 1998 — Aug 22, 2002
 Office with a 6-year term Period: Dec. 6, 1996 — Aug 22, 2002
BAGs only: Period: Dec. 7, 2000 — Aug 22, 2002

- ☐ **Report #2 Due — October 29, 2002**
 Period: Aug. 23, 2002 — Oct. 24, 2002

- ☒ **Report #3 Due — January 15, 2003**
 Period: Oct. 25, 2002 — Jan. 3, 2003
BAGs only: Period: Oct. 25, 2002 — Dec. 5, 2002

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 CITY OF RENO
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BALANCE

This figure should reflect the balance shown on your last Disposition of Unspent Contributions Report, or last Contributions & Expenses Report, if any _____

CONTRIBUTIONS SUMMARY

"Contribution" means a gift, loan, conveyance, deposit, payment, transfer or distribution of money or anything of value other than the services of a volunteer received. (NRS 294A.007)

- | | |
|--|---|
| 1. Total amount of monetary contributions | 0 |
| 2. Interest and income earned on contributions, if any | 0 |
| 3. TOTAL AMOUNT OF ALL MONETARY CONTRIBUTIONS (add lines 1 and 2) | 0 |
| 4. Total amount of In Kind Contributions | 0 |

EXPENSES SUMMARY

- | | |
|---|---------|
| 5. Total amount of monetary expenses in excess of \$100 | 0 |
| 6. Total amount of monetary expenses of \$100 or less | 0 |
| 7. Expense for filing fee | \$25.00 |
| 8. TOTAL AMOUNT OF ALL MONETARY EXPENSES (add lines 5 through 7) | \$25.00 |
| Remaining Balance (Subtract line 8 from 3) | 0 |
| 9. Total amount of In Kind Expenses | 0 |

AFFIRMATION

I declare under penalty of perjury that the foregoing is true and correct.

Signature

Rose Gordon

Date Executed On

November 29, 2002

EL201R3
154
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WARD 4

District (if applicable)

Contributions

[illegible]

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CAMPAIGN EXPENSESReport Period **#**

ROSE GORDON

RENO CITY COUNCIL

WARD 4

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
NONE	NONE	NONE	NONE

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**IN KIND CAMPAIGN
CONTRIBUTIONS****Report Period #**

ROSE GORDON

RENO CITY COUNCIL

WARD 4

Name (print)

Office (if applicable)

District (if applicable)

IN KIND**Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100**

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
NONE	NONE	NONE	NONE	NONE

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ROSE	GORDON	RENO CITY COUNCIL	WARD 4
Name (print)		Office (if applicable)	District (if applicable)

IN KIND

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
NONE	NONE	NONE	NONE

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